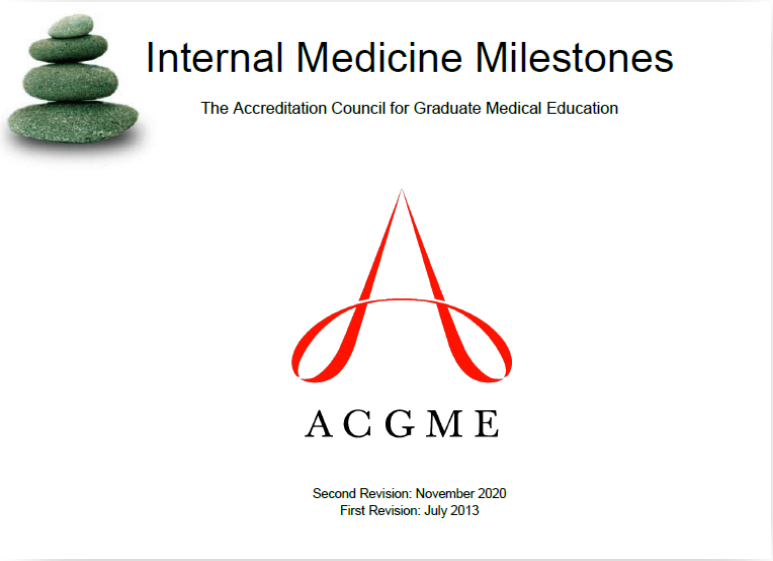
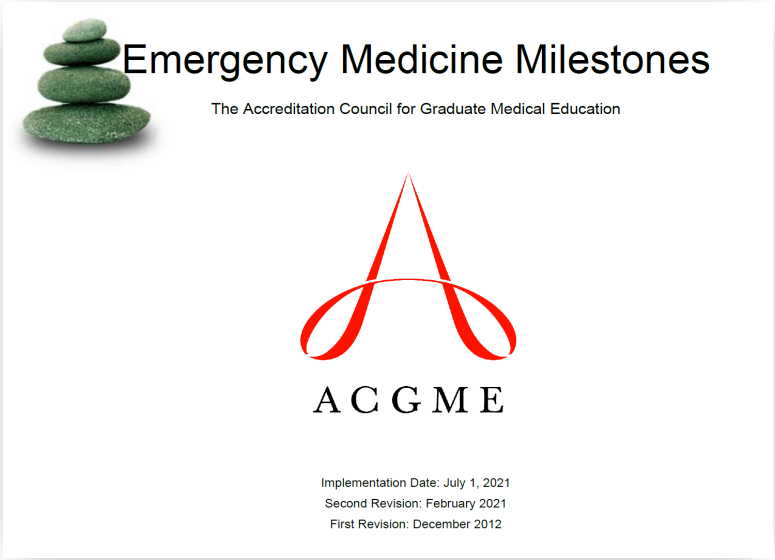
Internal Medicine, Emergency Medicine, and Critical Care Medicine (combined) programs must annually report on **each** set of Milestones.





Internal Medicine Milestones

The Accreditation Council for Graduate Medical Education

ACGME

Implementation Date: July 1, 2021
Second Revision: November 2020
First Revision: July 2013

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Internal Medicine Milestones

The Milestones are designed only for use in evaluation of residents in the context of their participation in ACGME-accredited residency programs. The Milestones provide a framework for the assessment of the development of the resident in key dimensions of the elements of physician competency in a specialty or subspecialty. They neither represent the entirety of the dimensions of the six domains of physician competency, nor are they designed to be relevant in any other context.

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The ACGME would like to thank the following organizations for their continued support in the development of the Milestones:

Alliance for Academic Internal Medicine

American Board of Internal Medicine

American College of Physicians

Association of Medical Colleges

Review Committee for Internal Medicine

Society of Hospital Medicine

Society of General Internal Medicine

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Understanding Milestone Levels and Reporting

This document presents the Milestones, which programs use in a semi-annual review of resident performance, and then report to the ACGME. Milestones are knowledge, skills, attitudes, and other attributes for each of the ACGME Competencies organized in a developmental framework. The narrative descriptions are targets for resident performance throughout their educational program.

Milestones are arranged into levels. Tracking from Level 1 to Level 5 is synonymous with moving from novice to expert resident in the specialty or subspecialty. For each reporting period, the Clinical Competency Committee will review the completed evaluations to select the milestone levels that best describe each learner's current performance, abilities, and attributes for each subcompetency.

These levels *do not* correspond with post-graduate year of education. Depending on previous experience, a junior resident may achieve higher levels early in his/her educational program just as a senior resident may be at a lower level later in his/her educational program. There is no predetermined timing for a resident to attain any particular level. Residents may also regress in achievement of their milestones. This may happen for many reasons, such as over scoring in a previous review, a disjointed experience in a particular procedure, or a significant act by the resident.

Selection of a level implies the resident substantially demonstrates the milestones in that level, as well as those in lower levels (see the diagram on page vi).

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Additional Notes

Level 4 is designed as a graduation *goal* but *does not* represent a graduation *requirement*. Making decisions about readiness for graduation and unsupervised practice is the purview of the program director. Furthermore, Milestones 2.0 include revisions and changes that preclude using Milestones as a sole assessment in high-stakes decisions (i.e., determination of eligibility for certification or credentialing). Level 5 is designed to represent an expert resident whose achievements in a subcompetency are greater than the expectation. Milestones are primarily designed for formative, developmental purposes to support continuous quality improvement for individual learners, education programs, and the specialty. The ACGME and its partners will continue to evaluate and perform research on the Milestones to assess their impact and value.

Examples are provided for some milestones within this document. Please note: the examples are not the required element or outcome; they are provided as a way to share the intent of the element.

Some milestone descriptions include statements about performing independently. These activities must occur in conformity to ACGME supervision guidelines as described in the Program Requirements, as well as to institutional and program policies. For example, a resident who performs a procedure independently must, at a minimum, be supervised through oversight.

A Supplemental Guide is also available to provide the intent of each subcompetency, examples for each level, assessment methods or tools, and other available resources. The Supplemental Guide, like examples contained within the Milestones, is designed only to assist the program director and Clinical Competency Committee, and is not meant to demonstrate any required element or outcome.

Additional resources are available in the Milestones section of the ACGME website. Follow the links under “What We Do” at www.acgme.org.

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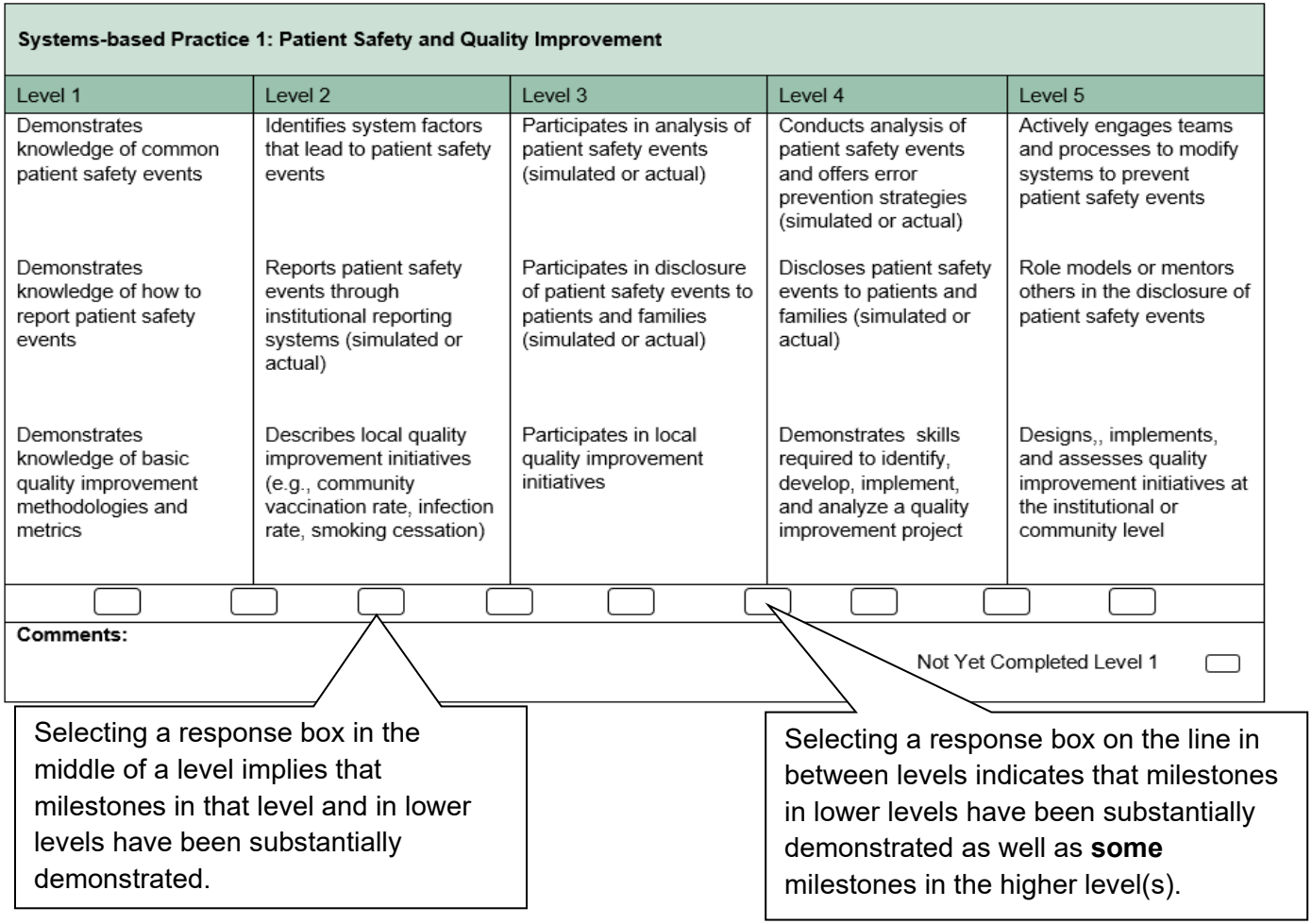
The diagram below presents an example set of milestones for one sub-competency in the same format as the ACGME Report Worksheet. For each reporting period, a resident's performance on the milestones for each sub-competency will be indicated by selecting the level of milestones that best describes that resident's performance in relation to those milestones.



Systems-based Practice 1: Patient Safety and Quality Improvement				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of common patient safety events	Identifies system factors that lead to patient safety events	Participates in analysis of patient safety events (simulated or actual)	Conducts analysis of patient safety events and offers error prevention strategies (simulated or actual)	Actively engages teams and processes to modify systems to prevent patient safety events
Demonstrates knowledge of how to report patient safety events	Reports patient safety events through institutional reporting systems (simulated or actual)	Participates in disclosure of patient safety events to patients and families (simulated or actual)	Discloses patient safety events to patients and families (simulated or actual)	Role models or mentors others in the disclosure of patient safety events
Demonstrates knowledge of basic quality improvement methodologies and metrics	Describes local quality improvement initiatives (e.g., community vaccination rate, infection rate, smoking cessation)	Participates in local quality improvement initiatives	Demonstrates skills required to identify, develop, implement, and analyze a quality improvement project	Designs,, implements, and assesses quality improvement initiatives at the institutional or community level

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Patient Care 1: History				
Level 1	Level 2	Level 3	Level 4	Level 5
Elicits and reports a comprehensive history for common patient presentations, with guidance Seeks data from secondary sources, with guidance	Elicits and concisely reports a hypothesis-driven patient history for common patient presentations Independently obtains data from secondary sources	Elicits and concisely reports a hypothesis-driven patient history for complex patient presentations Reconciles current data with secondary sources	Efficiently elicits and concisely reports a patient history, incorporating pertinent psychosocial and other determinants of health Uses history and secondary data to guide the need for further diagnostic testing	Efficiently and effectively tailors the history taking, including relevant historical subtleties, based on patient, family, and system needs Models effective use of history to guide the need for further diagnostic testing
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
Not Yet Completed Level 1 ☐ Not Yet Assessable ☐				

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Patient Care 2: Physical Examination				
Level 1	Level 2	Level 3	Level 4	Level 5
Performs a general physical examination while attending to patient comfort and safety Identifies common abnormal findings	Performs a hypothesis-driven physical examination for a common patient presentation Interprets common abnormal findings	Performs a hypothesis-driven physical examination for a complex patient presentation Identifies and interprets uncommon and complex abnormal findings	Uses advanced maneuvers to elicit subtle findings Integrates subtle physical examination findings to guide diagnosis and management	Models effective evidence-based physical examination technique Teaches the predictive values of the examination findings to guide diagnosis and management
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
Not Yet Completed Level 1 ☐ Not Yet Assessable ☐				

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Patient Care 3: Clinical Reasoning				
Level 1	Level 2	Level 3	Level 4	Level 5
Organizes and accurately summarizes information obtained from the patient evaluation to develop a clinical impression	Integrates information from all sources to develop a basic differential diagnosis for common patient presentations Identifies clinical reasoning errors within patient care, with guidance	Develops a thorough and prioritized differential diagnosis for common patient presentations Retrospectively applies clinical reasoning principles to identify errors	Develops prioritized differential diagnoses in complex patient presentations and incorporates subtle, unusual, or conflicting findings Continually re-appraises one's own clinical reasoning to improve patient care in real time	Coaches others to develop prioritized differential diagnoses in complex patient presentations Models how to recognize errors and reflect upon one's own clinical reasoning
☐	☐	☐	☐	☐ ☐ ☐ ☐
Comments:				

Not Yet Completed Level 1 ☐
Not Yet Assessable ☐

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Patient Care 4: Patient Management – Inpatient				
Level 1	Level 2	Level 3	Level 4	Level 5
Formulates management plans for common conditions, with guidance	Develops and implements management plans for common conditions, recognizing acuity, and modifies based on the clinical course	Develops and implements value-based (high value) management plans for patients with multisystem disease and comorbid conditions; modifies based on the clinical course	Uses shared decision making to develop and implement value-based (high value) comprehensive management plans for patients with comorbid and multisystem disease, including those patients requiring critical care	Develops and implements comprehensive management plans for patients with rare or ambiguous presentations or unusual comorbid conditions
Identifies opportunities to maintain and promote health	Develops and implements management plans to maintain and promote health, with guidance	Independently develops and implements plans to maintain and promote health, incorporating pertinent psychosocial and other determinants of health	Independently develops and implements comprehensive plans to maintain and promote health, incorporating pertinent psychosocial and other determinants of health	
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				

Not Yet Completed Level 1 ☐
Not Yet Assessable ☐

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Patient Care 5: Patient Management – Outpatient				
Level 1	Level 2	Level 3	Level 4	Level 5
Identifies opportunities to maintain and promote health	Develops and implements management plans to maintain and promote health	Develops and implements plans to maintain and promote health, incorporating pertinent psychosocial and other determinants of health	Develops and implements value-based (high-value) comprehensive plans to maintain and promote health	
Formulates management plans for a common chronic condition, with guidance	Develops and implements management plans for common chronic conditions	Develops and implements management plans for multiple chronic conditions	Develops and implements value-based (high value) comprehensive management plans for multiple chronic conditions, incorporating pertinent psychosocial and other determinants of health	Creates and leads a comprehensive patient-centered management plan for the patient with highly complex chronic conditions, integrating recommendations from multiple disciplines
Formulates management plans for acute common conditions, with guidance	Develops and implements management plans for common acute conditions	Develops and implements an initial management plan for patients with urgent or emergent conditions in the setting of chronic comorbidities	Develops and implements value-based (high value) management plans for patients with acute conditions	Develops and implements management plans for patients with subtle presentations, including rare or ambiguous conditions
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐

Comments:

Not Yet Completed Level 1 ☐
Not Yet Assessable ☐

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Patient Care 6: Digital Health				
Level 1	Level 2	Level 3	Level 4	Level 5
Uses electronic health record (EHR) for routine patient care activities Identifies the required components for a telehealth visit	Expands use of EHR to include and reconcile secondary data sources in patient care activities Performs assigned telehealth visits using approved technology	Effectively uses EHR capabilities in managing acute and chronic care of patients Identifies clinical situations that can be managed through a telehealth visit	Uses EHR to facilitate achievement of quality targets for patient panels Integrates telehealth effectively into clinical practice for the management of acute and chronic illness	Leads improvements to the EHR Develops and innovates new ways to use emerging technologies to augment telehealth visits
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				Not Yet Completed Level 1 ☐ Not Yet Assessable ☐

Patient Care
The resident is demonstrating satisfactory development of the knowledge, skill, and attitudes/behaviors needed to advance in the training program. The resident is demonstrating a learning trajectory that anticipates the achievement of competency for unsupervised practice that includes the delivery of safe, effective, patient-centered, timely, efficient, and equitable care.

_____Yes _____No _____Conditional on Improvement

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Medical Knowledge 1: Applied Foundational Sciences				
Level 1	Level 2	Level 3	Level 4	Level 5
Explains the scientific knowledge (e.g., physiology, social sciences, mechanism of disease) for normal function and common medical conditions	Explains the scientific knowledge for complex medical conditions	Integrates scientific knowledge to address comorbid conditions within the context of multisystem disease	Integrates scientific knowledge to address uncommon, atypical, or complex comorbid conditions within the context of multisystem disease	Demonstrates a nuanced understanding of the scientific knowledge related to uncommon, atypical, or complex conditions
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
Not Yet Completed Level 1 ☐ Not Yet Assessable ☐				

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Medical Knowledge 2: Therapeutic Knowledge				
Level 1	Level 2	Level 3	Level 4	Level 5
Explains the scientific basis for common therapies	Explains the indications, contraindications, risks, and benefits of common therapies	Integrates knowledge of therapeutic options in patients with comorbid conditions, multisystem disease, or uncertain diagnosis	Integrates knowledge of therapeutic options within the clinical and psychosocial context of the patient to formulate treatment options	Demonstrates a nuanced understanding of emerging, atypical, or complex therapeutic options
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
Not Yet Completed Level 1 ☐ Not Yet Assessable ☐				

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Medical Knowledge 3: Knowledge of Diagnostic Testing				
Level 1	Level 2	Level 3	Level 4	Level 5
Explains the rationale, risks, and benefits for common diagnostic testing Interprets results of common diagnostic tests	Explains the rationale, risks, and benefits for complex diagnostic testing Interprets complex diagnostic data	Integrates value and test characteristics of various diagnostic strategies in patients with common diseases Integrates complex diagnostic data accurately to reach high-probability diagnoses	Integrates value and test characteristics of various diagnostic strategies in patients with comorbid conditions or multisystem disease Anticipates and accounts for limitations when interpreting diagnostic data	Demonstrates a nuanced understanding of emerging diagnostic tests and procedures
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
Not Yet Completed Level 1 ☐ Not Yet Assessable ☐				

Medical Knowledge
The resident is demonstrating satisfactory development of the knowledge, skill, and attitudes/behaviors needed to advance in the training program. The resident is demonstrating a learning trajectory that anticipates the achievement of competency for unsupervised practice that includes the delivery of safe, effective, patient-centered, timely, efficient, and equitable care.

_____ Yes _____ No _____Conditional on Improvement

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Systems-Based Practice 1: Patient Safety and Quality Improvement				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of common patient safety events	Identifies system factors that lead to patient safety events	Contributes to the analysis of patient safety events (simulated or actual)	Conducts analysis of patient safety events and offers error prevention strategies (simulated or actual)	Leads teams and processes to modify systems to prevent patient safety events
Demonstrates knowledge of how to report patient safety events	Reports patient safety events through institutional reporting systems (actual or simulated)	Participates in disclosure of patient safety events to patients and families (simulated or actual)	Discloses patient safety events to patients and families (simulated or actual)	Models the disclosure of patient safety events
Demonstrates knowledge of basic quality improvement methodologies and metrics	Describes local quality improvement initiatives (e.g., community vaccination rate, infection rate, smoking cessation)	Contributes to local quality improvement initiatives	Demonstrates the skills required to identify, develop, implement, and analyze a quality improvement project	Creates, implements, and assesses sustainable quality improvement initiatives at the institutional or community level
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				Not Yet Completed Level 1 ☐

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Systems-Based Practice 2: System Navigation for Patient-Centered Care				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of care coordination	Coordinates care of patients by effectively engaging interprofessional teams in routine clinical situations	Coordinates care of patients by effectively engaging interprofessional teams in complex clinical situations	Models effective coordination of patient-centered care among different disciplines and specialties	Analyzes the process of care coordination and leads in the design and implementation of improvements
Identifies key elements for safe and effective transitions of care and hand-offs	Performs safe and effective transitions of care/hand-offs in routine clinical situations	Performs safe and effective transitions of care/hand-offs in complex clinical situations	Models and advocates for safe and effective transitions of care/hand-offs within and across health care delivery systems, including outpatient settings	Improves quality of transitions of care within and across health care delivery systems to optimize patient outcomes
Demonstrates knowledge of population and community health needs and disparities	Identifies specific population and community health needs and inequities for the local population	Uses local resources effectively to meet the needs of a patient population and community	Participates in changing and adapting practice to provide for the needs of specific populations	Leads innovations and advocates for populations and communities with health care inequities
☐	☐	☐	☐	☐
Comments:				
				Not Yet Completed Level 1 ☐

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Systems-Based Practice 3: Physician Role in Health Care Systems				
Level 1	Level 2	Level 3	Level 4	Level 5
Identifies key components of the health care system Describes basic health payment systems	Describes how components of a complex health care system are interrelated, and how this impacts patient care Delivers care with consideration of each patient's payment model	Discusses how individual practice affects the regional and national health care system Engages with patients in shared decision making, informed by each patient's payment models	Manages various components of the complex health care system to provide efficient and effective patient care Advocates for patient care needs with consideration of the limitations of each patient's payment model	Advocates for or leads systems change that enhances high-value, efficient, and effective patient care Actively engaged in influencing health policy through advocacy activities at the local, regional, or national level
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments: Not Yet Completed Level 1 ☐				

Systems-Based Practice
The resident is demonstrating satisfactory development of the knowledge, skill, and attitudes/behaviors needed to advance in the training program. The resident is demonstrating a learning trajectory that anticipates the achievement of competency for unsupervised practice that includes the delivery of safe, effective, patient-centered, timely, efficient, and equitable care.

_____ Yes _____ No _____ Conditional on Improvement

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Practice-Based Learning and Improvement 1: Evidence-Based and Informed Practice				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates how to access, categorize, and analyze clinical evidence, with guidance	Articulates clinical questions and elicits patient preferences and values to guide evidence-based care	Critically appraises and applies the best available evidence, integrated with patient preference, to the care of complex patients	Applies evidence, even in the face of uncertainty and conflicting evidence, to guide care, tailored to the individual patient	Coaches others to critically appraise and apply evidence to patient care
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				Not Yet Completed Level 1 ☐

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Practice-Based Learning and Improvement 2: Reflective Practice and Commitment to Personal Growth				
Level 1	Level 2	Level 3	Level 4	Level 5
Accepts responsibility for personal and professional development by establishing goals Identifies the factors that contribute to gap(s) between ideal and actual performance, with guidance	Demonstrates openness to performance data (feedback and other input) to inform goals Analyzes and reflects on the factors which contribute to gap(s) between ideal and actual performance, with guidance Actively seeks opportunities to improve	Seeks performance data episodically, with adaptability, and humility Institutes behavioral change(s) to narrow the gap(s) between ideal and actual performance Designs and implements an individualized learning plan, with prompting	Seeks performance data consistently with adaptability, and humility Challenges one's own assumptions and considers alternatives in narrowing the gap(s) between ideal and actual performance Independently creates and implements an individualized learning plan	Models consistently seeking performance data with adaptability and humility Coaches others on reflective practice Uses performance data to measure the effectiveness of the individualized learning plan and when necessary, improves it
☐	☐	☐	☐	☐
Comments: Not Yet Completed Level 1 ☐				

Practice-Based Learning and Improvement
The resident is demonstrating satisfactory development of the knowledge, skill, and attitudes/behaviors needed to advance in the training program. The resident is demonstrating a learning trajectory that anticipates the achievement of competency for unsupervised practice that includes the delivery of safe, effective, patient-centered, timely, efficient, and equitable care.

_____ Yes _____ No _____ Conditional on Improvement

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Professionalism 1: Professional Behavior				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates professional behavior in routine situations	Identifies potential triggers for professionalism lapses and accepts responsibility for one's own professionalism lapses	Demonstrates a pattern of professional behavior in complex or stressful situations	Recognizes situations that may trigger professionalism lapses and intervenes to prevent lapses in oneself and others	Coaches others when their behavior fails to meet professional expectations
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
Not Yet Completed Level 1 ☐				

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Professionalism 2: Ethical Principles				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of basic ethical principles	Applies basic principles to address straightforward ethical situations	Analyzes complex situations using ethical principles and identifies the need to seek help in addressing complex ethical situations	Analyzes complex situations and engages with appropriate resources for managing and addressing ethical dilemmas as needed	Identifies and seeks to address system-level factors that induce or exacerbate ethical problems or impede their resolution
☐	☐	☐	☐	☐
Comments:				
Not Yet Completed Level 1 ☐				

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Professionalism 3: Accountability/Conscientiousness				
Level 1	Level 2	Level 3	Level 4	Level 5
Performs administrative tasks and patient care responsibilities, with prompting	Performs administrative tasks and patient care responsibilities in a timely manner in routine situations	Performs administrative tasks and patient care responsibilities in a timely manner in complex or stressful situations	Proactively implements strategies to ensure that the needs of patients, teams, and systems are met	Creates strategies to enhance other's ability to efficiently complete administrative tasks and patient care responsibilities
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
Not Yet Completed Level 1 ☐				

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Professionalism 4: Knowledge of Systemic and Individual Factors of Well-Being*				
Level 1	Level 2	Level 3	Level 4	Level 5
Recognizes the importance of getting help when needed to address personal and professional well-being	Lists resources to support personal and professional well-being Recognizes that institutional factors affect well-being	With prompting, reflects on how personal and professional well-being may impact one's clinical practice Describes institutional factors that affect well-being	Reflects on actions in real time to proactively respond to the inherent emotional challenges of physician work Suggests potential solutions to institutional factors that affect well-being	Participates in institutional changes to promote personal and professional well-being
☐	☐	☐	☐	☐
Comments: Not Yet Completed Level 1 ☐				

*This subcompetency is not intended to evaluate a resident's well-being. Rather, the intent is to ensure that each resident has the fundamental knowledge of factors that impact well-being, the mechanism by which those factors impact well-being, and available resources and tools to improve well-being.

Professionalism

The resident is demonstrating satisfactory development of the knowledge, skill, and attitudes/behaviors needed to advance in the training program. The resident is demonstrating a learning trajectory that anticipates the achievement of competency for unsupervised practice that includes the delivery of safe, effective, patient-centered, timely, efficient, and equitable care.

_____ Yes _____ No _____ Conditional on Improvement

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Interpersonal and Communication Skills 1: Patient- and Family-Centered Communication				
Level 1	Level 2	Level 3	Level 4	Level 5
Uses language and non-verbal behavior to demonstrate respect and establish rapport	Establishes and maintains a therapeutic relationship using effective communication behaviors in straightforward encounters Identifies common barriers to effective communication	Establishes and maintains a therapeutic relationship using effective communication behaviors in challenging patient encounters Identifies complex barriers to effective communication, including personal bias	Establishes and maintains therapeutic relationships using shared decision making, regardless of complexity Mitigates communication barriers	Coaches others in developing and maintaining therapeutic relationships and mitigating communication barriers Models the mitigation of communication barriers
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments: Not Yet Completed Level 1 ☐				

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Interpersonal and Communication Skills 2: Interprofessional and Team Communication				
Level 1	Level 2	Level 3	Level 4	Level 5
Respectfully requests and responds to a consultation	Clearly and concisely requests and responds to a consultation	Checks own and others' understanding of recommendations when providing or receiving consultation	Coordinates recommendations from different consultants to optimize patient care	Facilitates conflict resolution between and amongst consultants when disagreement exists
Uses verbal and non-verbal communication that values all members of the interprofessional team	Communicates information, including basic feedback with all interprofessional team members	Facilitates interprofessional team communication to reconcile conflict and provides difficult feedback	Adapts communication style to fit interprofessional team needs and maximizes impact of feedback to the team	Models flexible communication strategies that facilitate excellence in interprofessional teamwork
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
Not Yet Completed Level 1 ☐				

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Interpersonal and Communication Skills 3: Communication within Health Care Systems				
Level 1	Level 2	Level 3	Level 4	Level 5
Accurately documents comprehensive and current information	Documents clinical encounter, including reasoning, through organized notes	Documents clinical encounter through concise and thorough notes	Documents clinical encounter clearly, concisely, timely, and in an organized form, including anticipatory guidance	Guides departmental or institutional communication policies and procedures
Communicates using formats specified by institutional policy to safeguard patient personal health information	Selects direct (e.g., telephone, in-person) and indirect (e.g., progress notes, text messages) forms of communication based on context, with assistance	Appropriately selects direct and indirect forms of communication based on context	Models effective written and verbal communication	
☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐				
Comments: Not Yet Completed Level 1 ☐				

Interpersonal and Communication Skills
The resident is demonstrating satisfactory development of the knowledge, skill, and attitudes/behaviors needed to advance in the training program. The resident is demonstrating a learning trajectory that anticipates the achievement of competency for unsupervised practice that includes the delivery of safe, effective, patient-centered, timely, efficient, and equitable care.

_____ Yes _____ No _____ Conditional on Improvement

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Overall Clinical Competence

This rating represents the assessment of the resident's development of overall clinical competence during this year of training:

____Superior: Far exceeds the expected level of development for this year of training

____Satisfactory: Always meets and occasionally exceeds the expected level of development for this year of training

____Conditional on Improvement: Meets some developmental milestones but occasionally falls short of the expected level of development for this year of training. An improvement plan is in place to facilitate achievement of competence appropriate to the level of training.

____Unsatisfactory: Consistently falls short of the expected level of development for this year of training.

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Emergency Medicine Milestones

The Accreditation Council for Graduate Medical Education

ACGME

Implementation Date: July 1, 2021

Second Revision: February 2021

First Revision: December 2012

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Emergency Medicine Milestones

The Milestones are designed only for use in evaluation of residents in the context of their participation in ACGME-accredited residency programs. The Milestones provide a framework for the assessment of the development of the resident in key dimensions of the elements of physician competence in a specialty or subspecialty. They neither represent the entirety of the dimensions of the six domains of physician competency, nor are they designed to be relevant in any other context.

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Emergency Medicine Milestones

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American Board of Emergency Medicine

Association of American Medical Colleges

Council of Residency Directors in Emergency Medicine

Emergency Medicine Residents' Association

Review Committee for Emergency Medicine

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Understanding Milestone Levels and Reporting

This document presents the Milestones, which programs use in a semi-annual review of resident performance, and then report to the ACGME. Milestones are knowledge, skills, attitudes, and other attributes for each of the ACGME Competencies organized in a developmental framework. The narrative descriptions are targets for resident performance throughout their educational program.

Milestones are arranged into levels. Tracking from Level 1 to Level 5 is synonymous with moving from novice to expert resident in the specialty or subspecialty. For each reporting period, the Clinical Competency Committee will review the completed evaluations to select the milestone levels that best describe each learner's current performance, abilities, and attributes for each subcompetency.

These levels *do not* correspond with post-graduate year of education. Depending on previous experience, a junior resident may achieve higher levels early in his/her educational program just as a senior resident may be at a lower level later in his/her educational program. There is no predetermined timing for a resident to attain any particular level. Residents may also regress in achievement of their milestones. This may happen for many reasons, such as over scoring in a previous review, a disjointed experience in a particular procedure, or a significant act by the resident.

Selection of a level implies the resident substantially demonstrates the milestones in that level, as well as those in lower levels (see the diagram on page vi).

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Additional Notes

Level 4 is designed as a graduation *goal* but *does not* represent a graduation *requirement*. Making decisions about readiness for graduation and unsupervised practice is the purview of the program director. Furthermore, Milestones 2.0 include revisions and changes that preclude using Milestones as a sole assessment in high-stakes decisions (i.e., determination of eligibility for certification or credentialing). Level 5 is designed to represent an expert resident whose achievements in a subcompetency are greater than the expectation. Milestones are primarily designed for formative, developmental purposes to support continuous quality improvement for individual learners, education programs, and the specialty. The ACGME and its partners will continue to evaluate and perform research on the Milestones to assess their impact and value.

Examples are provided for some milestones within this document. Please note: the examples are not the required element or outcome; they are provided as a way to share the intent of the element.

Some milestone descriptions include statements about performing independently. These activities must occur in conformity to ACGME supervision guidelines as described in the Program Requirements, as well as to institutional and program policies. For example, a resident who performs a procedure independently must, at a minimum, be supervised through oversight.

A Supplemental Guide is also available to provide the intent of each subcompetency, examples for each level, assessment methods or tools, and other available resources. The Supplemental Guide, like examples contained within the Milestones, is designed only to assist the program director and Clinical Competency Committee, and is not meant to demonstrate any required element or outcome.

Additional resources are available in the Milestones section of the ACGME website. Follow the links under “What We Do” at www.acgme.org.

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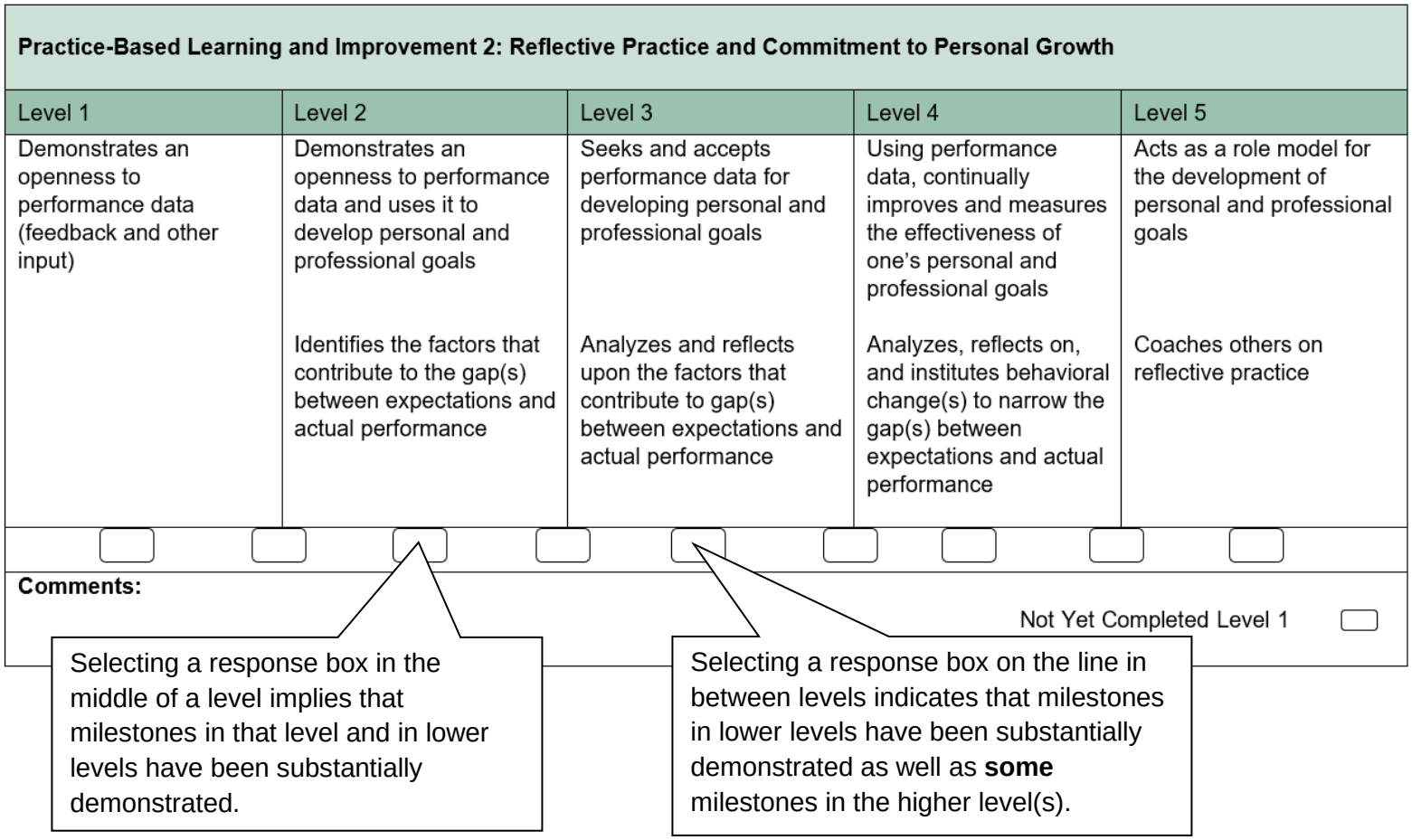
The diagram below presents an example set of milestones for one sub-competency in the same format as the ACGME Report Worksheet. For each reporting period, a resident's performance on the milestones for each sub-competency will be indicated by selecting the level of milestones that best describes that resident's performance in relation to those milestones.



Practice-Based Learning and Improvement 2: Reflective Practice and Commitment to Personal Growth				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates an openness to performance data (feedback and other input)	Demonstrates an openness to performance data and uses it to develop personal and professional goals Identifies the factors that contribute to the gap(s) between expectations and actual performance	Seeks and accepts performance data for developing personal and professional goals Analyzes and reflects upon the factors that contribute to gap(s) between expectations and actual performance	Using performance data, continually improves and measures the effectiveness of one's personal and professional goals Analyzes, reflects on, and institutes behavioral change(s) to narrow the gap(s) between expectations and actual performance	Acts as a role model for the development of personal and professional goals Coaches others on reflective practice
☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐				
Comments: Not Yet Completed Level 1 ☐				

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Patient Care 1: Emergency Stabilization				
Level 1	Level 2	Level 3	Level 4	Level 5
Detects when a patient's vital signs are abnormal Assesses a patient's ABCs and performs basic interventions	Identifies a patient who is unstable and requires immediate intervention Addresses the unstable vital signs and initiates advanced resuscitation procedures and protocols	Identifies a patient with occult presentation that is at risk for instability or deterioration Reassesses the patient's status after implementing a stabilizing intervention	Ascertains, in a timely fashion, when further clinical intervention for a patient is futile Integrates hospital support services into the management of critically-ill or -injured patients	Manages patients with rare or complex presentations requiring emergency stabilization
☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

Comments:

Not Yet Completed Level 1 ☐
Not Yet Assessable ☐

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Patient Care 2: Performance of a Focused History and Physical Exam				
Level 1	Level 2	Level 3	Level 4	Level 5
Elicits and communicates a reliable comprehensive patient history and performs a physical exam	Elicits and communicates a focused patient history and performs a focused physical exam that effectively address the patient's chief complaint and urgent issues	Prioritizes essential components of a patient history and physical exam, given a limited or dynamic circumstance	Using all potential sources of data, gathers those that are necessary for the beneficial management of patients	Models the effective use of a patient history and physical exam to minimize the need for further diagnostic testing
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				Not Yet Completed Level 1 ☐ Not Yet Assessable ☐

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Patient Care 3: Diagnostic Studies				
Level 1	Level 2	Level 3	Level 4	Level 5
Determines the need for diagnostic studies	Selects appropriate diagnostic studies and reviews the risks, benefits, and contraindications of them	Given a limited or dynamic circumstance, prioritizes the diagnostic studies that are essential	Practices cost-effective ordering of diagnostic studies	Proposes alternatives when barriers exist to specific diagnostic studies
Demonstrates understanding of diagnostic testing principles	Interprets results of diagnostic testing (e.g., electrocardiogram (EKG), diagnostic radiology, point-of-care ultrasound)	Orders and performs diagnostic testing, considering the pre-test probability of disease and the likelihood of test results altering management	Considers the factors that impact post-test probability	In the context of the patient presentation, discriminates between subtle and/or conflicting diagnostic results
☐	☐	☐	☐	☐
Comments:				
			Not Yet Completed Level 1	☐
			Not Yet Assessable	☐

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Patient Care 4: Diagnosis				
Level 1	Level 2	Level 3	Level 4	Level 5
Constructs a list of potential diagnoses based on the patient's chief complaint and initial assessment	Provides a prioritized differential diagnosis	Provides a diagnosis for common medical conditions and demonstrates the ability to modify a diagnosis based on a patient's clinical course and additional data	Provides a diagnosis for patients with multiple comorbidities or uncommon medical conditions, recognizing errors in clinical reasoning	Serves as a role model and educator to other learners for deriving diagnoses and recognizing errors in clinical reasoning
☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐				
Comments:				
Not Yet Completed Level 1 ☐ Not Yet Assessable ☐				

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Patient Care 5: Pharmacotherapy				
Level 1	Level 2	Level 3	Level 4	Level 5
Describes the different classifications of pharmacologic agents Consistently asks patients for drug allergies	Selects appropriate agent for therapeutic intervention Evaluates for potential adverse effects of pharmacotherapy and drug-to-drug interactions	Considers array of drug therapy and selects appropriate agent based on mechanism of action and intended effect Recognizes and acts upon common adverse effects and interactions	Selects the appropriate agent based on patient preferences, allergies, cost, policies, and clinical guidelines Recognizes and acts upon uncommon and unanticipated adverse effects and interactions	Participates in developing departmental and/or institutional policies on pharmacy and therapeutics
☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐				
Comments:				
Not Yet Completed Level 1 ☐ Not Yet Assessable ☐				

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Patient Care 6: Reassessment and Disposition				
Level 1	Level 2	Level 3	Level 4	Level 5
Describes basic resources available (e.g., follow-up care, rehabilitation, transfer centers) Describes basic patient education plans Identifies the need for patient re-evaluation	Makes a disposition decision for patients with routine conditions needing minimal resources Educates patients on simple discharge and admission plans Monitors that necessary diagnostic and therapeutic interventions are performed	Makes a disposition decision for patients with routine conditions, with resource utilization Educates patients regarding diagnosis, treatment plan, medication review and primary care physician/consultant appointments Identifies which patients will require ongoing emergency department evaluation and evaluates the effectiveness of diagnostic and therapeutic interventions	Makes disposition decision for patients with complex conditions, with resource utilization Educates patients on complex discharge and admission plans, including complex transfers Evaluates changes in clinical status during a patient's emergency department course	Participates in institutional committees to develop systems that enhance safe patient disposition and maximizes resources Participates in the development of protocols to enhance patient safety
☐	☐	☐	☐	☐

Comments:

Not Yet Completed Level 1 ☐
Not Yet Assessable ☐

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Patient Care 7: Multitasking (Task-Switching)				
Level 1	Level 2	Level 3	Level 4	Level 5
Manages a single patient amidst distractions	Task-switches between different patients of similar acuity	Employs task-switching in an efficient manner to manage multiple patients of varying acuity and at varying stages of work-up	Employs task-switching in an efficient manner to manage the emergency department	Employs task switching in an efficient manner to manage the emergency department under high-volume or surge situations
☐	☐	☐	☐	☐

Comments:

Not Yet Completed Level 1 ☐
Not Yet Assessable ☐

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Patient Care 8: General Approach to Procedures				
Level 1	Level 2	Level 3	Level 4	Level 5
Identifies indications for a procedure and pertinent anatomy and physiology	Assesses indications, risks, benefits, and alternatives and obtains informed consent in low- to moderate-risk situations	Assesses indications, risks, and benefits and weighs alternatives in high-risk situations	Acts to mitigate modifiable risk factors in high-risk situations	
Performs basic therapeutic procedures (e.g., suturing, splinting)	Performs and interprets basic procedures, with assistance	Performs and interprets advanced procedures, with guidance	Independently performs and interprets advanced procedures	Teaches advanced procedures and independently performs rare, time-sensitive procedures
	Recognizes common complications	Manages common complications	Independently recognizes and manages complex and uncommon complications	Performs procedural peer review
☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐				
Comments:				
Not Yet Completed Level 1 ☐ Not Yet Assessable ☐				

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Medical Knowledge 1: Scientific Knowledge				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates scientific knowledge of common presentations and conditions	Demonstrates scientific knowledge of complex presentations and conditions	Integrates scientific knowledge of comorbid conditions for complex presentations	Integrates scientific knowledge of uncommon, atypical, or complex comorbid conditions for complex presentations	Pursues and integrates new and emerging knowledge
☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐				
Comments:				
Not Yet Completed Level 1 ☐ Not Yet Assessable ☐				

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Medical Knowledge 2: Treatment and Clinical Reasoning				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of treatment of common conditions	Demonstrates knowledge of treatment of patients with complex conditions	Demonstrates knowledge of the impact of patient factors on treatment	Demonstrates comprehensive knowledge of the varying patterns of disease presentation and alternative and adjuvant treatments of patients	Contributes to the body of knowledge on the varying patterns of disease presentation, and alternative and adjuvant treatments of patients
Identifies types of clinical reasoning errors within patient care, with substantial guidance	Identifies types of clinical reasoning errors within patient care	Applies clinical reasoning principles to retrospectively identify cognitive errors	Continually re-appraises one's clinical reasoning to prospectively minimize cognitive errors and manage uncertainty	Coaches others to recognize and avoid cognitive errors
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
				Not Yet Completed Level 1 ☐ Not Yet Assessable ☐

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Systems-Based Practice 1: Patient Safety				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of common patient safety events	Identifies system factors that lead to patient safety events	Participates in analysis of patient safety events (simulated or actual)	Conducts analysis of patient safety events and offers error prevention strategies (simulated or actual)	Actively engages teams and processes to modify systems for preventing patient safety events
Demonstrates knowledge of how to report patient safety events	Reports patient safety events through institutional reporting systems (simulated or actual)	Participates in disclosure of patient safety events to patients and families (simulated or actual)	Discloses patient safety events to patients and families (simulated or actual)	Acts as a role model and/or mentor for others in the disclosing of patient safety events
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
Not Yet Completed Level 1 ☐				

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Systems-Based Practice 2: Quality Improvement				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of basic quality improvement methodologies and metrics	Describes local quality improvement initiatives (e.g., emergency department throughput, testing turnaround times)	Participates in local quality improvement initiatives	Demonstrates the skills required for identifying, developing, implementing, and analyzing a quality improvement project	Creates, implements, and assesses quality improvement initiatives at the institutional or community level
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
Not Yet Completed Level 1 ☐				

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Systems-Based Practice 3: System Navigation for Patient-Centered Care				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of care coordination	In routine clinical situations, effectively coordinates patient care integrating the roles of interprofessional teams	In complex clinical situations, effectively coordinates patient care by integrating the roles of the interprofessional teams	Serves as a role model, effectively coordinates patient-centered care among different disciplines and specialties	Analyzes the process of care coordination and leads in the design and implementation of improvements
Identifies key elements for safe and effective transitions of care and hand-offs	In routine clinical situations, enables safe and effective transitions of care/hand-offs	In complex clinical situations, enables safe and effective transitions of care/hand-offs	Serves as a role model, advocates for safe and effective transitions of care/hand-offs within and across health care delivery systems, including outpatient settings	Improves quality of transitions of care within and across health care delivery systems to optimize patient outcomes
Demonstrates knowledge of population and community health needs and disparities	Identifies specific population and community health needs and inequities for their local population	Effectively uses local resources to meet the needs of a patient population and community	Participates in changing and adapting practice to provide for the needs of specific populations	Leads innovations and advocates for populations and communities with health care inequities
☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐				
Comments:				
Not Yet Completed Level 1 ☐				

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Systems-Based Practice 4: Physician Role in Health Care Systems				
Level 1	Level 2	Level 3	Level 4	Level 5
Identifies key components of the complex health care system (e.g., hospital, skilled nursing facility, finance, personnel, technology)	Describes how components of a complex health care system are interrelated, and how this impacts patient care	Discusses how individual practice affects the broader system (e.g., length of stay, readmission rates, clinical efficiency)	Manages various components of the complex health care system to provide efficient and effective patient care and the transition of care	Advocates for or leads systems change that enhances high value, efficient, and effective patient care, and the transition of care
Describes basic health payment systems, including (e.g., government, private, public, uninsured care) practice models	Delivers care with consideration of each patient's payment model (e.g., insurance type)	Engages patients in shared decision making, informed by each patient's payment models	Advocates for patient care needs with consideration of the limitations of each patient's payment model	Participates in health policy advocacy activities
	Identifies basic knowledge domains required for medical practice (e.g., information technology, legal, billing, coding, financial, and personnel aspects)	Demonstrates efficient integration of information technology required for medical practice (e.g., electronic health record, documentation required for billing and coding)	Describes core administrative knowledge needed for the transition to practice (e.g., contract negotiation, malpractice insurance, government regulation, compliance)	Analyzes individual practice patterns and professional requirements
☐	☐ ☐	☐ ☐	☐ ☐	☐ ☐
Comments:				
Not Yet Completed Level 1 ☐				

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Practice-Based Learning and Improvement 1: Evidence-Based and Informed Practice				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates how to access and use available evidence	Articulates the clinical questions that are necessary to guide evidence-based care	Locates and applies the best available evidence, integrating it with patient preference, to the care of complex patients	Critically appraises and applies evidence even in the face of uncertainty and of conflicting evidence to guide care that is tailored to the individual patient	Coaches others to critically appraise and apply evidence for complex patients, and/or participates in the development of guidelines
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments: Not Yet Completed Level 1 ☐				

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Practice-Based Learning and Improvement 2: Reflective Practice and Commitment to Personal Growth				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates an openness to performance data (feedback and other input)	Demonstrates an openness to performance data and uses it to develop personal and professional goals Identifies the factors that contribute to the gap(s) between expectations and actual performance	Seeks and accepts performance data for developing personal and professional goals Analyzes and reflects upon the factors that contribute to gap(s) between expectations and actual performance	Using performance data, continually improves and measures the effectiveness of one's personal and professional goals Analyzes, reflects on, and institutes behavioral change(s) to narrow the gap(s) between expectations and actual performance	Acts as a role model for the development of personal and professional goals Coaches others on reflective practice
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
Not Yet Completed Level 1 ☐				

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Professionalism 1: Professional Behavior and Ethical Principles				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates professional behavior in routine situations and in how to report professionalism lapses	Identifies and describes potential triggers and takes responsibility for professionalism lapses	Exhibits professional behavior in complex and/or stressful situations	Sets apart those situations that might trigger professionalism lapses and intervenes to prevent them in oneself and others	Coaches others when their behavior fails to meet professional expectations
Demonstrates knowledge of the ethical principles underlying patient care	Analyzes straightforward situations using ethical principles	Analyzes complex situations using ethical principles, and recognizes the need to seek help in managing and resolving them	Uses appropriate resources for managing and resolving ethical dilemmas	Identifies and addresses system-level factors that either induce or exacerbate ethical problems or impede their resolution
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
Not Yet Completed Level 1 ☐				

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Professionalism 2: Accountability/Conscientiousness				
Level 1	Level 2	Level 3	Level 4	Level 5
In routine situations, performs tasks and responsibilities with appropriate attention to detail Responds promptly to requests and reminders to complete tasks and responsibilities	In routine situations, performs tasks and responsibilities in a timely manner with appropriate attention to detail Takes responsibility for failure to complete tasks and responsibilities	In complex or stressful situations, performs tasks and responsibilities in a timely manner with appropriate attention to detail Recognizes situations that might impact one's own ability to complete tasks and responsibilities in a timely manner, and describes strategies for ensuring timely task completion in the future	Recognizes situations that might impact others' ability to complete tasks and responsibilities Proactively implements strategies to ensure that the needs of patients, teams, and systems are met	Takes ownership of system outcomes
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
				Not Yet Completed Level 1 ☐

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Professionalism 3: Self-Awareness and Well-Being				
Level 1	Level 2	Level 3	Level 4	Level 5
Recognizes, with assistance, the status of one's personal and professional well-being	Independently recognizes the status of one's personal and professional well-being and engages in help-seeking behaviors	With assistance, proposes a plan to optimize personal and professional well-being	Independently develops a plan to optimize one's personal and professional well-being	Coaches others when their emotional responses or level of knowledge/skills fail to meet professional expectations
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
Not Yet Completed Level 1 ☐				

This subcompetency is not intended to evaluate a resident's well-being. Rather, the intent is to ensure that each resident has the fundamental knowledge of factors that affect well-being, the mechanisms by which those factors affect well-being, and available resources and tools to improve well-being.

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Interpersonal and Communication Skills 1: Patient- and Family-Centered Communication				
Level 1	Level 2	Level 3	Level 4	Level 5
Uses language and non-verbal behavior to reflect respect and establish rapport while accurately communicating one's own role within the health care system	Establishes a therapeutic relationship in straightforward encounters with patients using active listening and clear language	Establishes a therapeutic relationship in challenging patient encounters	Easily establishes therapeutic relationships with patients, regardless of the complexity of cases	Acts as a mentor to others in situational awareness and critical self-reflection with the aim of consistently developing positive therapeutic relationships and minimizing communication barriers
Identifies common barriers to effective communication (e.g., language, disability)	Identifies complex barriers to effective communication (e.g., health literacy, cultural, technology)	When prompted, reflects on one's personal biases, while attempting to minimize communication barriers	Independently recognizes personal biases of patients, while attempting to proactively minimize communication barriers	
With insight gained through an assessment of patient/family expectations coupled with an understanding of their health status and treatment options, adjusts one's communication strategies	Organizes and initiates communication with a patient/family by clarifying expectations and verifying one's understanding of the clinical situation	With guidance, sensitively and compassionately delivers medical information to patients, elicits patient/family values, learns their goals and preferences, and acknowledges uncertainty and conflict	Independently uses shared decision making with a patient/family to align their values, goals, and preferences with potential treatment options and ultimately to achieve a personalized care plan	Acts as a role model to exemplify shared decision making in patient/family communication that embodies various degrees of uncertainty/conflict
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐

Comments:

Not Yet Completed Level 1 ☐

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Interpersonal and Communication Skills 2: Interprofessional and Team Communication				
Level 1	Level 2	Level 3	Level 4	Level 5
Respectfully requests a consultation	Clearly and concisely requests a consultation or other resources for patient care	Integrates recommendations made by various members of the health care team to optimize patient care	Acts as a role model for flexible communication strategies, i.e., those strategies that value input from all health care team members and that resolve conflict when needed	
Uses language that reflects the values all members of the health care team	Communicates information effectively with all health care team members	Engages in active listening to adapt to the communication styles of the team	Uses effective communication to lead or manage health care teams	Acts as a role model for communication skills necessary to lead or manage health care teams
Receives feedback in a respectful manner	Solicits feedback on performance as a member of the health care team	Communicates concerns and provides feedback to peers and learners	Communicates feedback and constructive criticism to superiors	In complex situations, facilitates regular health care team-based feedback
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
				Not Yet Completed Level 1 ☐

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Interpersonal and Communication Skills 3: Communication within Health Care Systems				
Level 1	Level 2	Level 3	Level 4	Level 5
Accurately documents information in the patient's record and safeguards the patient's personal information	Demonstrates organized diagnostic and therapeutic reasoning through the patient record in a timely manner	Concisely reports diagnostic and therapeutic reasoning in the patient record	Communicates clearly, concisely, and contemporaneously in an organized written form, including anticipatory guidance	Models feedback to improve others' written communication
Communicates through appropriate channels as required by institutional policy (e.g., patient safety reports, cell phone/pager usage)	Respectfully communicates concerns about the system	Uses appropriate channels to offer clear and constructive suggestions for improving the system	Initiates difficult conversations with appropriate stakeholders to improve the system	Facilitates dialogue regarding systems issues among larger community stakeholders (e.g., institution, the health care system, and/or the field)
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
				Not Yet Completed Level 1 ☐

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Critical Care Medicine Milestones

The Accreditation Council for Graduate Medical Education

ACGME

Second Revision: December 2020
First Revision: October 2014

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Critical Care Medicine Milestones

The Milestones are designed only for use in evaluation of fellows in the context of their participation in ACGME-accredited residency or fellowship programs. The Milestones provide a framework for the assessment of the development of the fellow in key dimensions of the elements of physician competence in a specialty or subspecialty. They neither represent the entirety of the dimensions of the six domains of physician competency, nor are they designed to be relevant in any other context.

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American Board of Internal Medicine

American College of Chest Physicians

Association of Pulmonary and Critical Care Medicine Program Directors

Review Committee for Internal Medicine

Society for Critical Care Medicine

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Understanding Milestone Levels and Reporting

This document presents the Milestones, which programs use in a semi-annual review of fellow performance, and then report to the ACGME. Milestones are knowledge, skills, attitudes, and other attributes for each of the ACGME Competencies organized in a developmental framework. The narrative descriptions are targets for resident/fellow performance throughout their educational program.

Milestones are arranged into levels. Tracking from Level 1 to Level 5 is synonymous with moving from novice to expert fellow in the specialty or subspecialty. For each reporting period, the Clinical Competency Committee will review the completed evaluations to select the milestone levels that best describe each learner's current performance, abilities, and attributes for each subcompetency.

These levels *do not* correspond with post-graduate year of education. Depending on previous experience, a junior fellow may achieve higher levels early in his/her educational program just as a senior fellow may be at a lower level later in his/her educational program. There is no predetermined timing for a resident to attain any particular level. Fellows may also regress in achievement of their milestones. This may happen for many reasons, such as over scoring in a previous review, a disjointed experience in a particular procedure, or a significant act by the fellow.

Selection of a level implies the fellow substantially demonstrates the milestones in that level, as well as those in lower levels (see the diagram on page vi).

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Additional Notes

Level 4 is designed as a graduation *goal* but *does not* represent a graduation *requirement*. Making decisions about readiness for graduation and unsupervised practice is the purview of the program director. Furthermore, Milestones 2.0 include revisions and changes that preclude using Milestones as a sole assessment in high-stakes decisions (i.e., determination of eligibility for certification or credentialing). Level 5 is designed to represent an expert fellow whose achievements in a subcompetency are greater than the expectation. Milestones are primarily designed for formative, developmental purposes to support continuous quality improvement for individual learners, education programs, and the specialty. The ACGME and its partners will continue to evaluate and perform research on the Milestones to assess their impact and value.

Some milestone descriptions include statements about performing independently. These activities must occur in conformity to ACGME supervision guidelines as described in the Program Requirements, as well as to institutional and program policies. For example, a fellow who performs a procedure independently must, at a minimum, be supervised through oversight.

A Supplemental Guide is also available to provide the intent of each subcompetency, examples for each level, assessment methods or tools, and other available resources. The Supplemental Guide, like examples contained within the Milestones, is designed only to assist the program director and Clinical Competency Committee, and is not meant to demonstrate any required element or outcome.

Additional resources are available in the Milestones section of the ACGME website. Follow the links under “What We Do” at www.acgme.org.

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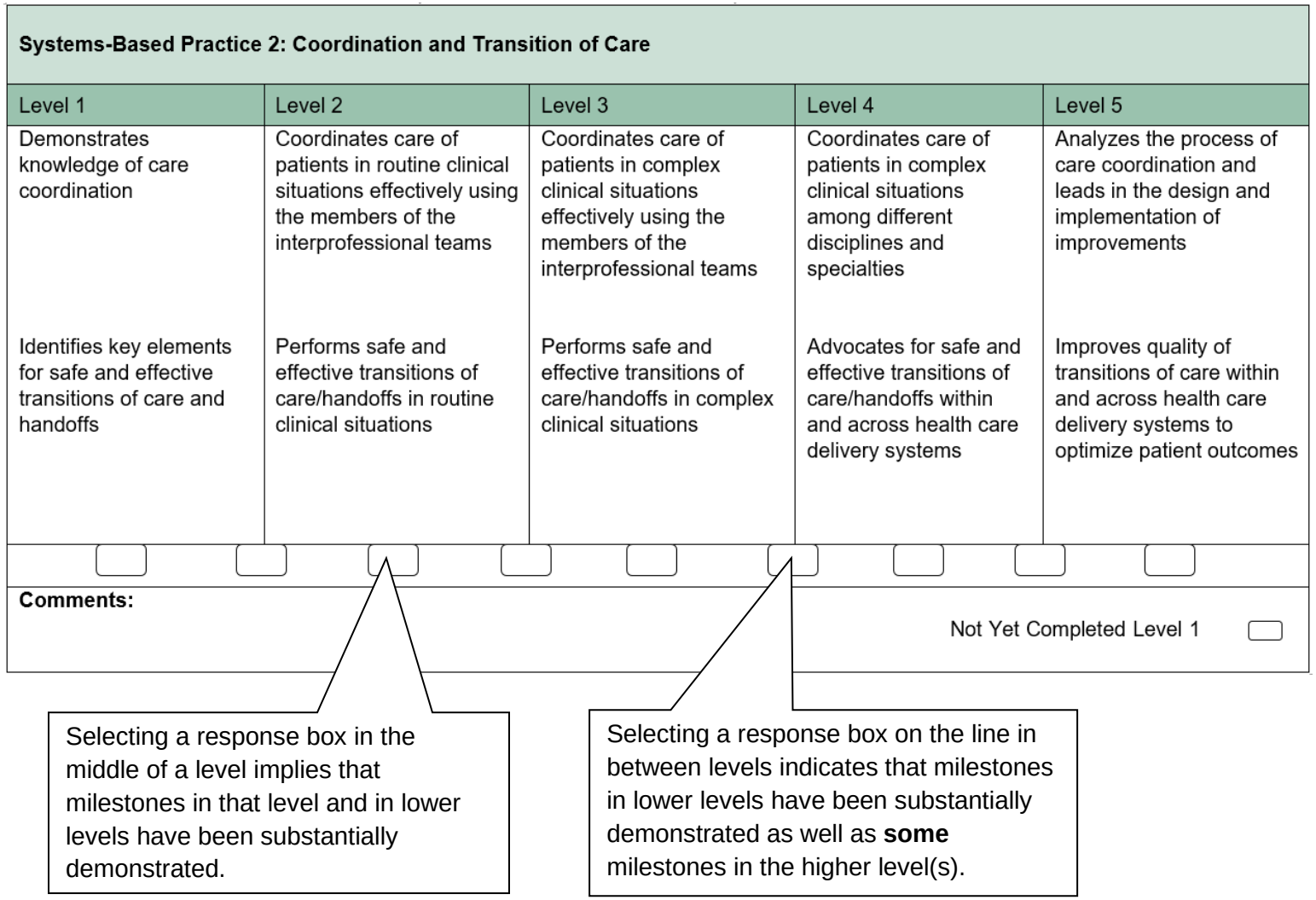
The diagram below presents an example set of milestones for one sub-competency in the same format as the ACGME Report Worksheet. For each reporting period, a fellow's performance on the milestones for each sub-competency will be indicated by selecting the level of milestones that best describes that fellow's performance in relation to those milestones.



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Patient Care 1: History and Physical Examination				
Level 1	Level 2	Level 3	Level 4	Level 5
Obtains specialty-specific, detailed, and accurate history from patients with common disorders, with substantial guidance	Obtains specialty-specific, detailed, and accurate history from patients with common disorders	Obtains specialty-specific, detailed, and accurate history from multiple sources for patients with complex disorders	Independently and efficiently obtains a specialty-specific, detailed, and accurate history from multiple sources for patients with complex disorders	Independently obtains a specialty-specific, detailed, and accurate history from multiple sources for patients with rare disorders
Performs a specialty-specific, detailed, and accurate physical exam on patients with common disorders, with substantial guidance	Performs a specialty-specific, detailed, and accurate physical exam on patients with common disorders	Elicits specialty-specific signs while performing a detailed and accurate physical exam on patients with complex disorders	Independently and efficiently elicits specialty-specific signs while performing a detailed and accurate physical exam on patients with complex disorders	Independently elicits specialty-specific signs while performing a detailed and accurate physical exam on patients with complex or rare disorders in clinically difficult circumstances
☐	☐	☐	☐	☐	☐	☐	☐	☐
Comments:				
			Not Yet Completed Level 1 ☐	
			Not Yet Assessable ☐	

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Patient Care 2: Disease Management in Critical Care				
Level 1	Level 2	Level 3	Level 4	Level 5
Manages unstable patients requiring a higher intensity of care, with substantial guidance	Manages unstable patients with single system disease	Manages unstable patients with multisystem disease	Independently manages unstable patients with multisystem disease and coordinates interdisciplinary care plans	
Identifies the long-term consequences of critical illness, with substantial guidance	Anticipates the long-term consequences of critical illness	Anticipates and acts to minimize the long-term consequences of critical illness	Anticipates and acts independently to minimize the long-term consequences of critical illness	Independently facilitates post-intensive care unit care
Provides critical care consultation, with substantial guidance	Provides critical care consultation for patients with single system disease	Provides critical care consultation for patients with multisystem disease	Independently triages and prioritizes comprehensive critical care consultation for multiple patients	Independently reconciles conflicting consultative recommendations to optimize patient care
☐	☐	☐	☐	☐ ☐ ☐ ☐
Comments:				
				Not Yet Completed Level 1 ☐
				Not Yet Assessable ☐

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Patient Care 3: Pre-Procedure Assessment				
Level 1	Level 2	Level 3	Level 4	Level 5
Identifies indications for procedures and their risks, benefits, and alternatives	Assesses indications, risks, benefits and weighs alternatives in low- to moderate-risk situations	Assesses indications, risks, benefits and weighs alternatives in high-risk situations	Independently assesses indications, risks, benefits and weighs alternatives in high-risk situations and acts to mitigate modifiable risk factors	Recognized by peers as an expert in procedural assessment
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				Not Yet Completed Level 1 ☐ Not Yet Assessable ☐

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Patient Care 4: Procedures (Invasive and Non-Invasive)				
Level 1	Level 2	Level 3	Level 4	Level 5
Performs simple procedures, with assistance Interprets limited procedural results, with assistance Recognizes common complications	Performs complex procedures, with assistance Interprets comprehensive procedural results, with assistance Recognizes uncommon complications	Performs complex procedures, with minimal assistance Independently interprets comprehensive procedural results Recognizes and manages complications, with oversight	Independently performs all procedures in the current practice environment Independently interprets comprehensive procedural results and applies them to the patient's clinical context Independently recognizes and manages complications	Recognized by peers as a procedural expert
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				Not Yet Completed Level 1 ☐ Not Yet Assessable ☐

Patient Care
The fellow is demonstrating satisfactory development of the knowledge, skill, and attitudes/behaviors needed to advance in the training program. The fellow is demonstrating a learning trajectory that anticipates the achievement of competency for unsupervised practice that includes the delivery of safe, effective, patient-centered, timely, efficient, and equitable care.

_____ Yes _____ No _____ Conditional on Improvement

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Medical Knowledge 1: Clinical Reasoning				
Level 1	Level 2	Level 3	Level 4	Level 5
Synthesizes a specialty-specific, analytic, and prioritized differential diagnosis for common presentations, with substantial guidance	Synthesizes a specialty-specific, analytic, and prioritized differential diagnosis for common presentations	Synthesizes a specialty-specific, analytic, and prioritized differential diagnosis for complex presentations	Synthesizes information to reach high-probability and/or high-risk diagnoses and anticipates potential complications in patient care	Recognized by peers as an expert diagnostician
Identifies types of clinical reasoning errors within patient care, with substantial guidance	Identifies types of clinical reasoning errors within patient care	Applies clinical reasoning principles to retrospectively identify cognitive errors	Continually re-appraises one's clinical reasoning to prospectively minimize cognitive errors and manage uncertainty	Coaches others to recognize and avoid cognitive errors
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				Not Yet Completed Level 1 ☐ Not Yet Assessable ☐

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Medical Knowledge 2: Scientific Knowledge of Disease and Therapeutics				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates scientific knowledge of common diseases Demonstrates knowledge of pharmacology and therapeutics for common diseases	Applies scientific knowledge of common diseases Applies knowledge of pharmacology and therapeutics for common diseases	Applies scientific knowledge of complex diseases Applies knowledge of pharmacology and therapeutics for complex diseases	Independently applies scientific knowledge of complex diseases Independently applies knowledge of pharmacology and therapeutics for complex diseases	Expertly teaches scientific knowledge of complex diseases Applies cutting-edge knowledge of pharmacology and therapeutics
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				Not Yet Completed Level 1 ☐ Not Yet Assessable ☐

Medical Knowledge
The fellow is demonstrating satisfactory development of the knowledge, skill, and attitudes/behaviors needed to advance in the training program. The fellow is demonstrating a learning trajectory that anticipates the achievement of competency for unsupervised practice that includes the delivery of safe, effective, patient-centered, timely, efficient, and equitable care.

____ Yes ____ No ____ Conditional on Improvement

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Systems-Based Practice 1: Patient Safety and Quality Improvement				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of common patient safety events	Identifies system factors that lead to patient safety events	Participates in analysis of patient safety events (simulated or actual)	Conducts analysis of patient safety events and offers error prevention strategies (simulated or actual)	Actively engages teams and processes to modify systems to prevent patient safety events
Demonstrates knowledge of how to report patient safety events	Reports patient safety events through institutional reporting systems (simulated or actual)	Participates in disclosure of patient safety events to patients and families (simulated or actual)	Discloses patient safety events to patients and families (simulated or actual)	Role models or mentors others in the disclosure of patient safety events
Demonstrates knowledge of basic quality improvement methodologies and metrics	Describes local quality improvement initiatives (e.g., community vaccination rate, infection rate, smoking cessation)	Participates in local quality improvement initiatives	Demonstrates the skills required to identify, develop, implement, and analyze a quality improvement project	Creates, implements, and assesses quality improvement initiatives at the institutional or community level
☐	☐	☐	☐	☐ ☐ ☐ ☐
Comments:				
				Not Yet Completed Level 1 ☐

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Systems-Based Practice 2: Coordination and Transition of Care				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of care coordination	Coordinates care of patients in routine clinical situations effectively using the members of the interprofessional teams	Coordinates care of patients in complex clinical situations effectively using the members of the interprofessional teams	Coordinates care of patients in complex clinical situations among different disciplines and specialties	Analyzes the process of care coordination and leads in the design and implementation of improvements
Identifies key elements for safe and effective transitions of care and hand-offs	Performs safe and effective transitions of care/hand-offs in routine clinical situations	Performs safe and effective transitions of care/hand-offs in complex clinical situations	Advocates for safe and effective transitions of care/hand-offs within and across health care delivery systems	Improves quality of transitions of care within and across health care delivery systems to optimize patient outcomes
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐

Comments:

Not Yet Completed Level 1 ☐

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Systems-Based Practice 3: Population Health				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates knowledge of population and community health needs and disparities	Identifies specific population and community health needs and inequities for the local population	Uses local resources effectively to meet the needs of a patient population in the community	Advocates for changing and adapting practice to provide for the needs of specific populations	Leads innovations and advocates for populations and communities with health care inequities
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
Not Yet Completed Level 1 ☐				

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Systems-Based Practice 4: Physician Role in Health Care Systems				
Level 1	Level 2	Level 3	Level 4	Level 5
Describes basic health care delivery systems (e.g., practice and payment models, accountable care organizations)	Describes how components of a complex health care delivery system are interrelated, and how this impacts patient care (e.g., out-of-network hospitalizations)	Discusses how individual practice affects the broader system (e.g., length of stay, cost of care, readmission rates, clinical efficiency)	Advocates for patient care needs (e.g., community resources, patient assistance resources) with consideration of the limitations of each patient's payment model	Advocates for or leads systems change that enhances high-value, efficient, and effective patient care
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments: Not Yet Completed Level 1 ☐				

Systems-Based Practice
The fellow is demonstrating satisfactory development of the knowledge, skill, and attitudes/behaviors needed to advance in the training program. The fellow is demonstrating a learning trajectory that anticipates the achievement of competency for unsupervised practice that includes the delivery of safe, effective, patient-centered, timely, efficient, and equitable care.

_____ Yes _____ No _____ Conditional on Improvement

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Practice-Based Learning and Improvement 1: Evidence-Based and Informed Practice				
Level 1	Level 2	Level 3	Level 4	Level 5
Demonstrates how to access and apply available evidence to care for patients	Elicits patient preferences and values to guide evidence-based care for patients	Locates and applies the best available evidence, integrated with patient preference to care for patients	Critically appraises and applies evidence even in the face of uncertainty and conflicting evidence to guide care, tailored to the individual patient	Coaches others to critically appraise and apply evidence; and/or participates in the development of guidelines
Demonstrates knowledge of basic trial design and statistical concepts and communicates details of published scientific work	Reads scientific literature, identifies gaps, and generates hypotheses for planned scholarly activity	Participates in a scholarly project	Presents scholarly activity at local or regional meetings, and/or submits an abstract of their scholarly work to a regional meeting	Effectively presents scholarly work at national and international meetings or has a peer reviewed publication accepted or grant funded
☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐				
Comments:				
Not Yet Completed Level 1 ☐				

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Practice-Based Learning and Improvement 2: Reflective Practice and Commitment to Personal Growth				
Level 1	Level 2	Level 3	Level 4	Level 5
Accepts responsibility for personal and professional development by establishing goals	Demonstrates openness to performance feedback in order to inform goals	Seeks performance feedback episodically, with adaptability, and humility	Intentionally seeks performance feedback consistently with adaptability, and humility	Consistently role models the seeking of performance data with adaptability and humility
Identifies the factors which contribute to gap(s) between expectations and actual performance	Analyzes and reflects on the factors which contribute to gap(s) between expectations and actual performance	Analyzes, reflects on, and institutes behavioral change(s) to narrow the gap(s) between expectations and actual performance	Identifies and uses alternative methods to narrow the gap(s) between expectations and actual performance	Coaches others on reflective practice
Actively seeks opportunities to improve knowledge and abilities	Designs and implements a learning plan, with prompting	Independently creates and implements a learning plan	Uses performance feedback to measure the effectiveness of the learning plan and when necessary, improves it	Facilitates the design and implementation of learning plans for others
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				Not Yet Completed Level 1 ☐

Practice-Based Learning and Improvement
The fellow is demonstrating satisfactory development of the knowledge, skill, and attitudes/behaviors needed to advance in the training program. The fellow is demonstrating a learning trajectory that anticipates the achievement of competency for unsupervised practice that includes the delivery of safe, effective, patient-centered, timely, efficient, and equitable care.

_____ Yes _____ No _____ Conditional on Improvement

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Professionalism 1: Professional Behavior and Ethical Principles				
Level 1	Level 2	Level 3	Level 4	Level 5
Identifies and describes potential triggers for professionalism lapses in self	Demonstrates insight into professional behavior in routine situations and takes responsibility for own professionalism lapses	Demonstrates professional behavior in complex or stressful situations	Recognizes situations that may trigger professionalism lapses and acts to prevent them	Recognized by peers as a resource for professionalism concerns
Recognizes professionalism lapses in others	Knows institutional processes for reporting professionalism lapses, including strategies for addressing common barriers	Follows institutional processes for reporting professionalism lapses, including strategies for addressing common barriers	Intervenes to prevent and address professionalism lapses in peers	Coaches peers when their behavior fails to meet professional expectations
Demonstrates knowledge of the ethical principles underlying informed consent, surrogate decision making, advance directives, confidentiality, error disclosure, stewardship of limited resources, and related topics	Analyzes straightforward situations using ethical principles and applies them to practice	Analyzes complex situations using ethical principles, and applies them to practice, while recognizing the need to seek help in managing these situations	Recognizes and utilizes appropriate resources for managing and resolving ethical dilemmas as needed (e.g., ethics consultations, literature review, risk management/legal consultation)	Identifies and seeks to address system-level factors that induce or exacerbate ethical problems or impede their resolution
☐	☐	☐	☐	☐	☐	☐	☐	☐
Comments:				
Not Yet Completed Level 1 ☐				

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Professionalism 2: Accountability				
Level 1	Level 2	Level 3	Level 4	Level 5
Completes tasks and responsibilities in response to requests or reminders	Completes tasks and responsibilities in a timely manner, without reminders	Completes tasks and responsibilities without reminders, identifies potential barriers to completion, and acts to mitigate those barriers in routine situations	Completes tasks and responsibilities without reminders, identifies potential barriers to completion, and acts to mitigates those barriers in complex or stressful situations	Assists others in developing strategies for completing tasks and responsibilities
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				Not Yet Completed Level 1 ☐

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Professionalism 3: Well-Being and Resiliency				
Level 1	Level 2	Level 3	Level 4	Level 5
Identifies elements of well-being and describes risk factors for burnout and signs and symptoms of burnout and depression in self or peers	With assistance, recognizes status of well-being and risk factors for maladaptation in self or peers	Independently recognizes status of well-being in self or peers and reports concerns to appropriate personnel	Develops and implements a plan to improve well-being of self or peers, including utilization of institutional or external resources	Recommends and facilitates system changes to promote well-being in a practice or institution
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments: Not Yet Completed Level 1 ☐				

Professionalism
The fellow is demonstrating satisfactory development of the knowledge, skill, and attitudes/behaviors needed to advance in the training program. The fellow is demonstrating a learning trajectory that anticipates the achievement of competency for unsupervised practice that includes the delivery of safe, effective, patient-centered, timely, efficient, and equitable care.

_____ Yes _____ No _____ Conditional on Improvement

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Interpersonal and Communication Skills 1: Patient- and Family-Centered Communication				
Level 1	Level 2	Level 3	Level 4	Level 5
Uses language and nonverbal behavior to demonstrate respect and establish rapport Identifies common barriers to effective communication (e.g., language, disability, personal bias)	Establishes a therapeutic relationship using effective communication behaviors in straightforward encounters Identifies complex barriers to effective communication (e.g. health literacy, cultural), including personal bias	Establishes a therapeutic relationship using effective communication behaviors in challenging patient encounters Mitigates communication barriers, including personal bias	Establishes therapeutic relationships using shared decision making (e.g., attention to patient/family concerns and context), regardless of complexity Role models the mitigation of communication barriers	Coaches others in developing therapeutic relationships and mitigating communication barriers
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments: Not Yet Completed Level 1 ☐				

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Interpersonal and Communication Skills 2: Interprofessional and Team Communication				
Level 1	Level 2	Level 3	Level 4	Level 5
Uses language that values all members of the team	Communicates information, including basic feedback with all team members	Facilitates team communication to reconcile conflict and provides difficult feedback	Adapts communication style to fit team needs and maximizes impact of feedback to the team	Role models flexible communication strategies that facilitate excellence in teamwork
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				Not Yet Completed Level 1 ☐

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Interpersonal and Communication Skills 3: Communication within Health Care Systems				
Level 1	Level 2	Level 3	Level 4	Level 5
Accurately records comprehensive information	Documents clinical reasoning through organized notes	Documents clinical reasoning and is concise most of the time	Documents clinical reasoning concisely in an organized form, including next steps in care	Guides departmental or institutional communication policies and procedures
Communicates using formats specified by institutional policy to safeguard patient personal health information	Selects direct (e.g., telephone, in-person) and indirect (e.g., progress notes, text messages) forms of communication based on context, with assistance	Appropriately selects direct and indirect forms of communication based on context	Role models effective written and verbal communication	
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				
Not Yet Completed Level 1 ☐				

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Interpersonal and Communication Skills 4: Complex Communication Around Serious Illness				
Level 1	Level 2	Level 3	Level 4	Level 5
Identifies prognostic communication as a key element for shared decision making	Assesses the patient's families/caregivers' prognostic awareness and identifies preferences for receiving prognostic information	Delivers basic prognostic information and attends to emotional responses of patient and families/caregivers	Tailors communication of prognosis according to disease characteristics and trajectory, patient consent, family needs, and medical uncertainty, and manages intense emotional response	Coaches others in the communication of prognostic information
Identifies the need to assess patient/family expectations and understanding of their health status and treatment options	Facilitates communication with patient/family by introducing stakeholders, setting the agenda, clarifying expectations, and verifying an understanding of the clinical situation	Sensitively and compassionately delivers medical information; elicits patient/family values, goals and preferences; and acknowledges uncertainty and conflict, with guidance	Independently uses shared decision making to align patient/family values, goals, and preferences with treatment options to make a personalized care plan in situations with a high degree of uncertainty and conflict	Coaches shared decision making in patient/family communication
☐	☐	☐	☐	☐ ☐ ☐ ☐ ☐
Comments:				Not Yet Completed Level 1 ☐

Interpersonal and Communication Skills
The fellow is demonstrating satisfactory development of the knowledge, skill, and attitudes/behaviors needed to advance in the training program. The fellow is demonstrating a learning trajectory that anticipates the achievement of competency for unsupervised practice that includes the delivery of safe, effective, patient-centered, timely, efficient, and equitable care.

_____ Yes _____ No _____ Conditional on Improvement

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Overall Clinical Competence

This rating represents the assessment of the fellow's development of overall clinical competence during this year of training:

____Superior: Far exceeds the expected level of development for this year of training

____Satisfactory: Always meets and occasionally exceeds the expected level of development for this year of training

____Conditional on Improvement: Meets some developmental milestones but occasionally falls short of the expected level of development for this year of training. An improvement plan is in place to facilitate achievement of competence appropriate to the level of training.

____Unsatisfactory: Consistently falls short of the expected level of development for this year of training.

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